



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

**\*BIBDATASHEET\*****CONFIRMATION NO. 2308**

Bib Data Sheet

SERIAL NUMBER 10/663,937	FILING DATE 09/16/2003  RULE	CLASS 439	GROUP ART UNIT 2839	ATTORNEY DOCKET NO. 37505.0243
-----------------------------	---------------------------------------	--------------	------------------------	--------------------------------------

## APPLICANTS

David R. Ciurzynski, Attica, NY;

Kenneth L. Grubb, Snyder, NY;

\*\* CONTINUING DATA \*\*\*\*\* *yes*

This application is a DIV of 09/939,351 08/24/2001 PAT 6,626,680

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *yes*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/22/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature Initials	STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------	------------------------	-----------------------	----------------------------

## ADDRESS

33751  
 WILSON GREATBATCH TECHNOLOGIES, INC.  
 10,000 WEHRLE DRIVE  
 CLARENCE, NY  
 14031

## TITLE

Wire bonding surface for connecting an electrical energy storage device to an implantable medical device

FILING FEE  RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------